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United S Northe	United States Bankruptcy Court Northern District of California  Voluntary Peti				y Petition
Name of Debtor (if individual, enter Last, First, N Skerl, Adam John	Middle):	Name of Joint Debtor (Spouse) (Last, First, Middle):			
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):  None	years	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):			s
Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all): 7017	er I.D. (ITIN) No./Complete EIN	Last four digit (if more than		Γaxpayer I.D. (IT)	IN) No./Complete EIN
Street Address of Debtor (No. and Street, City, a 571 Tannet Ct	and State)	Street Addres	ss of Joint Debtor (No. and St	treet, City, and St	ate
Pleasanton, CA	ZIPCODE 94566				ZIPCODE
County of Residence or of the Principal Place of Business:			esidence or of the Principal Pl	ace of Business:	•
Alameda  Mailing Address of Debtor (if different from street)	et address):	Mailing Add	ress of Joint Debtor (if differe	ent from street add	dress).
ivialing Address of Deotor (if different from succ	et address).	Walling Aud	tess of John Deotor (If differen	ent from street add	uress).
	ZIPCODE	ZIPCODE			
Location of Principal Assets of Business Debtor (	(if different from street address a	bove):			ZIPCODE
Type of Debtor (Form of Organization)	Nature of Business (Check one box)			nkruptcy Code U n is Filed (Check	
(Check one box)  Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP)	Health Care Business Single Asset Real Estate as def 11 U.S.C. § 101 (51B) Railroad Stockbroker	ined in	Chapter 7  Chapter 9  Chapter 11	Chapter 15 P Recognition Main Proceed	etition for of a Foreign ding
Definition Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Commodity Broker Clearing Bank		Chapter 12 Chapter 13	Recognition Nonmain Pro	of a Foreign
	Other  Tax-Exempt Entity (Check box, if applical  Debtor is a tax-exempt orga under Title 26 of the United Code (the Internal Revenue	ble) anization 1 States	Nat (Ch. (Ch. Debts are primarily of debts, defined in 11 U §101(8) as "incurred individual primarily to personal, family, or he purpose."	J.S.C. by an for a	Debts are primarily business debts
Filing Fee (Check one be	,	<u> </u>	k one box: Chapter 11	Debtors	
Full Filing Fee attached		-	ebtor is a small business as d	efined in 11 U.S.	C. § 101(51D)
Filing Fee to be paid in installments (Applica	able to individuals only) Must at	I	ebtor is not a small business a	as defined in 11 U	J.S.C. § 101(51D)
signed application for the court's consideration to pay fee except in installments. Rule 1006(	on certifying that the debtor is una	able D	ebtor's aggregate nonconting wed to insiders or affiliates) a		
Filing Fee waiver requested (applicable to chattach signed application for the court's cons		.	plan is being filed with this p cceptances of the plan were s ore classes, in accordance wi	olicited prepetition	
Statistical/Administrative Information					THIS SPACE IS FOR
Debtor estimates that funds will be available for dist  Debtor estimates that, after any exempt property is e distribution to unsecured creditors.		paid, there will be	e no funds available for		COURT USE ONLY
Estimated Number of Creditors					
1-49 50-99 100-199 200-999	<del></del>	10,001- 25,000	25,001- 50,001- 50,000 100,000	Over 100,000	
Estimated Assets  \$0 to \$50,001 to \$100,001 to \$500,001 to \$1 \$50,000 \$100,000 \$500,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion	
Estimated Liabilities  \$0 to \$50,001 to \$100,001 to \$500,001 to \$1 \$50,000 \$100,000 \$500,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion	

**B1** (Official Form 1) (1/08) Page 2 Voluntary Petition Name of Debtor(s): (This page must be completed and filed in every case) Adam John Skerl All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: NONE Where Filed: Date Filed: Location Case Number: Where Filed: N.A. Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: NONE Case Number: Date Filed: Relationship: Judge: District: Exhibit B Exhibit A (To be completed if debtor is an individual (To be completed if debtor is required to file periodic reports (e.g., forms whose debts are primarily consumer debts) 10K and 10Q) with the Securities and Exchange Commission pursuant to I, the attorney for the petitioner named in the foregoing petition, declare that I have informed Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United relief under chapter 11) States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b). /s/ Matthew M Spielberg March 17, 2010 Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) Date Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition.  $\square$ No Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) 朷 Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. П There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United Sates in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) П Landlord has a judgment for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment)

B1 (Official Form 1) (1/08)	Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Adam John Skerl
	atures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct.	
If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.  (Check only <b>one</b> box.)
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.
	Pursuant to 11 U.S.C.§ 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
X /s/ Adam John Skerl	
Signature of Debtor	X
·	(Signature of Foreign Representative)
XSignature of Joint Debtor	
Digitature of Your Decici	(Direct J.N f.T an Demography)
Telephone Number (If not represented by attorney)	(Printed Name of Foreign Representative)
March 17, 2010	
Date	(Date)
Signature of Attorney*	
₹7	Signature of Non-Attorney Petition Preparer
X /s/ Matthew M Spielberg Signature of Attorney for Debtor(s)	I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer
MATTHEW M SPIELBERG 72773  Printed Name of Attorney for Debtor(s)	as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition
Firm Name	preparers, I have given the debtor notice of the maximum amount before any
21855 Redwood Road	document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
Address Castro Valley, CA 94546	required in that section. Official Form 17 is attached.
Casuo vaney, CA 94540	Printed Name and title, if any, of Bankruptcy Petition Preparer
_(510) 886-5751	Printed Ivanic and true, it any, or bankrupicy reaction repairs
Telephone Number	Social Security Number (If the bankruptcy petition preparer is not an individual
March 17, 2010 Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a	state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Address
	Address
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	X
The debtor requests relief in accordance with the chapter of title 11,	Date
United States Code, specified in this petition.	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.
X Signature of Authorized Individual	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11
Date	and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

# UNITED STATES BANKRUPTCY COURT Northern District of California

In re Adan	n John Skerl	Case No.
	Debtor(s)	(if known)

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

correct.

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit
5. The efficiency dialog it districts of bankrupicy administrator has determined that the credit

I certify under penalty of perjury that the information provided above is true and

counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

Signature of Debtor: /s/ Adam John Skerl
ADAM JOHN SKERL

Date: \_\_\_\_March 17, 2010

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# United States Bankruptcy Court Northern District of California

Adam John Skerl In re		Case No.	
	Debtor		
		Chapter 7	

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

### AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 600,000.00		
B – Personal Property	YES	3	\$ 84,125.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 779,107.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	3		\$ 159,812.00	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 6,163.34
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 7,883.00
ТОТ	ΓAL	15	\$ 684,125.00	\$ 938,919.00	

# United States Bankruptcy Court Northern District of California

In re	Adam John Skerl		Case No.	
	D	ebtor		
			Chapter	7

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount	
Domestic Support Obligations (from Schedule E)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Loan Obligations (from Schedule F)	\$	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00
TOTAL	\$	0.00

### **State the Following:**

Average Income (from Schedule I, Line 16)	\$ 6,163.34
Average Expenses (from Schedule J, Line 18)	\$ 7,883.00
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20)	\$ 10,302.99

## State the Following:

State and I amove mg.			
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$	164,107.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.	00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$	0.00
4. Total from Schedule F		\$	159,812.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$	323,919.00

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In re	Adam John Skerl	Case No.	
	Debtor	(If known)	

# **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
single family residence	JTWROS	C	600,000.00	779,795.00
571 Tannet Ct Pleasanton, CA	JIWKOS		000,000.00	779,793.00
	Tota	ı <b>&gt;</b>	600,000.00	

(Report also on Summary of Schedules.)

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In re	Adam John Skerl	Case No.
	Debtor	(If known)

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		cash on hand Residence	С	25.00
<ol> <li>Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.</li> </ol>		checking and savings Bank of America Pleasanton	С	100.00
Security deposits with public utilities, telephone companies, landlords, and others.	X			
Household goods and furnishings, including audio, video, and computer equipment.		household goods and furnishings Residence	С	2,000.00
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		clothing Residence	С	500.00
7. Furs and jewelry.		jewelry Residence	С	1,000.00
Firearms and sports, photographic, and other hobby equipment.	X			
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			

In re	Adam John Skerl	Case No
	Debtor	(If known)

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
10. Annuities. Itemize and name each issuer.  11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)  12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	XX	401k Merrill Lynch	С	45,000.00
12. Stock and interprets in incompared and	X	IRA Fidelity	С	10,000.00
<ol> <li>Stock and interests in incorporated and unincorporated businesses. Itemize.</li> </ol>				
<ol> <li>Interests in partnerships or joint ventures.</li> <li>Itemize.</li> </ol>	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
<ol> <li>Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.</li> </ol>	X			
<ol> <li>Other liquidated debts owing debtor including tax refunds. Give particulars.</li> </ol>	X			
Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			

In re	Adam John Skerl	Case No.
	Debtor	(If known)

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2004 GMC Yukon XL Denali 90k miles Residence	С	12,000.00
		1998 Lexus LS 400 needs work (in wife's name) Residence	С	3,000.00
26. Boats, motors, and accessories.		1978 Schuster inboard outdrive boat 17 foot Residence	С	500.00
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		potential stay package from NUMMI	С	10,000.00
	1	0 continuation sheets attached Tot	al	\$ 84,125.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re	Adam John Skerl	Case No.
	Debtor	(If known)

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

	botor claims the exemptions to which debtor is entitled under: heck one box)	
	11 U.S.C. § 522(b)(2)	Check if debtor claims a homestead exemption that exceeds
abla	11 U.S.C. § 522(b)(3)	\$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
cash on hand	C.C.P. 703.140(b)(5)	25.00	25.00
checking and savings	C.C.P. 703.140(b)(5)	100.00	100.00
household goods and furnishings	C.C.P. 703.140(b)(3)	2,000.00	2,000.00
clothing	C.C.P. 703.140(b)(3)	500.00	500.00
jewelry	C.C.P. 703.140(b)(4)	1,000.00	1,000.00
401k	C.C.P. 703.140(b)(10)(E)	45,000.00	45,000.00
IRA	C.C.P. 703.140(b)(10)(E)	10,000.00	10,000.00
potential stay package from NUMMI	C.C.P. 703.140(b)(5)	10,000.00	10,000.00
2004 GMC Yukon XL Denali 90k miles	C.C.P. 703.140(b)(2) C.C.P. 703.140(b)(5)	3,300.00 8,700.00	12,000.00
1998 Lexus LS 400 needs work (in wife's name)	C.C.P. 703.140(b)(5)	3,000.00	3,000.00

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In re	Adam John Skerl	<b></b> ,	Case No.
	Debtor		(If known)

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0603			Incurred: 6/2007					81,795.00
GMAC Mortgage PO Box 4622 Waterloo, IA 50704-4622			Lien: Deed of Trust re 571 Tannet Ct., Pleasanton CA				696,795.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			VALUE \$ 615,000.00					
ACCOUNT NO.0036			Incurred: 6/2007					82,312.00
GMAC Mortgage PO Box 4622 Waterloo, IA 50704-4622			re 2nd mortgage - 571 Tannet Ct., Pleasanton, CA				82,312.00	
			VALUE \$ 0.00					
ACCOUNT NO.			VALUE \$					
0 continuation sheets attached	•		<b>77</b> . 1	Sub	tota	ı×,	\$ 779,107.00	\$ 164,107.00
			(Total o	7	Γofa <sup>†</sup>	<b>)</b>	\$ 779,107.00	\$ 164,107.00

Summary of Schedules) also on Statistical

(If applicable, report also on Statistical Summary of Certain hispilites and Related

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In re_	Adam John Skerl	, Case No.
	Debtor	(if known)

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

$\sqrt{}$	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

### Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C.  $\S$  507(a)(3).

### Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

### Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

<b>B6E</b> (O	fficial Form 6E) (12/07) - Cont.	
In	Adam John Skerl	, Case No.
	Debtor	(if known)
	ertain farmers and fishermen	
Cla	ims of certain farmers and fishermen, up to \$5,400* per farmer or	fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	peposits by individuals	
_		se, or rental of property or services for personal, family, or household use,
that we	re not delivered or provided. 11 U.S.C. § 507(a)(7).	
□ 1	axes and Certain Other Debts Owed to Governmental Units	
Ta	xes, customs duties, and penalties owing to federal, state, and local	al governmental units as set forth in 11 U.S.C. § 507(a)(8).
	commitments to Maintain the Capital of an Insured Depositor	y Institution
Govern		fice of Thrift Supervision, Comptroller of the Currency, or Board of ssors, to maintain the capital of an insured depository institution. 11
	Claims for Death or Personal Injury While Debtor Was Intoxic	cated
	aims for death or personal injury resulting from the operation of a drug, or another substance. 11 U.S.C. § 507(a)(10).	motor vehicle or vessel while the debtor was intoxicated from using
* Amo adjustr		ears thereafter with respect to cases commenced on or after the date of

0 \_\_\_\_ continuation sheets attached

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In re _	Adam John Skerl	Case No
	Debtor	(If known)

# SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6673  American Express PO Box 981537 El Paso TX 79998-1537			Consideration: Credit Card Debt (Unsecured)				10,605.00
ACCOUNT NO. 4002  American Express PO Box 981540 El Paso TX 79998-1540 Ft. Lauderdale, FL 33329-7863			Consideration: Credit Card Debt (Unsecured)				25,573.00
ACCOUNT NO. 0942 Aurora Enterprises 2442 S Downing St. Denver CO 80210			Incurred: 2/2009 re collection for avjobs.com				60.00
ACCOUNT NO. 6894  Cal Coast Credit Service 2906 McBride Lane Santa Rosa CA 95403			Incurred: 9/2009 re collection for Doug Jameson, Psy.D.				137.00
continuation sheets attached	!			Sub	total 'otal		\$ 36,375.00 \$

(Use only on last page of the completed Schedule F.)

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In re	Adam John Skerl	,	Case No.		
	Debtor			(If known)	

# SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6047  Chase Bank USA 800 Brooksedge Blvd. Westerville OH 43081			Incurred: 1/2005 Consideration: Credit Card Debt (Unsecured)				31,983.00
ACCOUNT NO. 6164  Chase Bank USA 800 Brooksedge Blvd. Westerville OH 43081			Incurred: 1/2008 Consideration: Credit Card Debt (Unsecured)				13,069.00
ACCOUNT NO. 3844 Citi Cards PO Box 6241 Sioux Falls SD 57117			Incurred: 3/2006 Consideration: Credit Card Debt (Unsecured)				28,721.00
ACCOUNT NO. 4511 Citi Cards PO Box 6241 Sioux Falls SD 57117			Incurred: 11/1995 Consideration: Credit Card Debt (Unsecured)				34,542.00
ACCOUNT NO. 0044  Dell Computer/Web Bank 12234 N IH 35 SB Bldg B Austin TX 78753			Incurred: 12/2008 Consideration: Credit Card Debt (Unsecured)				2,604.00
Sheet no. 1 of 2 continuation sheets to Schedule of Creditors Holding Unsecured Nonpriority Claims					tota Tota		\$ 110,919.00 \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re	Adam John Skerl		Case No.		
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# SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0071  Discover Financial Services PO Box 15316 Wilmington DE 19850			Incurred: 5/2003 Consideration: Credit Card Debt (Unsecured)				10,592.00
ACCOUNT NO. 4633  Home Depot/Citibank PO Box 6497 Sioux Falls SD 57117			Incurred: 6/2006 Consideration: Credit Card Debt (Unsecured)				760.00
ACCOUNT NO.  Nationwide Credit Corporation PO Box 9156 Alexandria, VA 22304			Collection for American Express				Notice Only
ACCOUNT NO. 2104  Rash Curtis & Associates 190 S Orchard Ave. Suite 250  Vacaville CA 95688			Incurred: 7/2009 re collection for Valleycare Health				266.00
ACCOUNT NO. 3812  Sprint P.O. Box 660075  Dallas, TX 75266-0075			cell phone service				900.00
Sheet no. 2 of 2 continuation sheets atta to Schedule of Creditors Holding Unsecured	iched			Sub	tota	l>	\$ 12,518.00

Nonpriority Claims (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re	Adam John Skerl	Case No.	
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# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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In re	Adam John Skerl	Case No.	
-	Debtor		(if known)

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

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NAME AND ADDRESS OF CREDITOR

Debtor's Marital

**Employment:** 

Married

Status:

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In re_	Adam John Skerl	Case		
	Debtor	Case —	(if known)	

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

DEPENDENTS OF DEBTOR AND SPOUSE

AGE(S): 9, 6

**SPOUSE** 

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

RELATIONSHIP(S): son, son

DEBTOR

Occupation				
Occupation	Production supervisor	clerk		
Name of Employer	NUMMI	Washington 1	Hospital	
How long employed	3 years	7 years		
Address of Employer	45500 Fremont Blvd	2000 Mowry	Ave	
	Fremont, CA 94538	Fremont, CA	94538	
INCOME: (Estimate of average	e or projected monthly income at time case filed)		DEBTOR	SPOUSE
1. Monthly gross wages, salar	y, and commissions		¢ 5,650,66	\$1,908.00
(Prorate if not paid mont	hly.)		\$5,650.66	
2. Estimated monthly overtime	e		\$	\$
3. SUBTOTAL			\$5,650.66	\$1,908.00
4. LESS PAYROLL DEDUCT	TONS			
. D11 41:-	1		\$550.33	\$265.00
<ul><li>a. Payroll taxes and socia</li><li>b. Insurance</li></ul>	1 security		\$223.16	\$21.00
c. Union Dues			\$0.00	\$0.00
d. Other (Specify: (D)40	01k	)	\$ 335.83	\$0.00
5. SUBTOTAL OF PAYROLI	_ DEDUCTIONS		\$_1,109.32	\$8
5 TOTAL NET MONTHLY	TAKE HOME PAY		\$ 4,541.34	\$1,622.00
7. Regular income from opera	tion of business or profession or farm		\$ 0.00	\$ 0.00
(Attach detailed statement)	and of customers of protession of runn			
8. Income from real property			\$0.00	\$0.00
9. Interest and dividends			\$0.00	\$0.00
	r support payments payable to the debtor for the			
debtor's use or that of depe			\$0.00	\$0.00
11. Social security or other go	vernment assistance		\$0.00	\$0.00
(Specify)			Φ0.00	Ψ
12. Pension or retirement inco	me		\$0.00	\$0.00
13. Other monthly income			\$0.00	\$0.00
(0 10)			\$0.00	\$0.00
14. SUBTOTAL OF LINES 7	THROUGH 13		\$0.00	\$0.00
15. AVERAGE MONTHLY I	NCOME (Add amounts shown on Lines 6 and 14)		\$ 4,541.34	\$_1,622.00
16. COMBINED AVERAGE	MONTHLY INCOME (Combine column totals		\$6	5,163.34_

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17.	Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:	
	employer is in the process of shutting down	

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In re_	Adam John Skerl	Case No	
	Debtor	(if known)	

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's familiangle. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.	
Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedulabeled "Spouse."	ale of expenditures
1. Rent or home mortgage payment (include lot rented for mobile home)	\$2,108.00
a. Are real estate taxes included? YesNo	2,100.00
b. Is property insurance included? Yes No	
2. Utilities: a. Electricity and heating fuel	\$275.00_
b. Water and sewer	\$75.00_
c. Telephone	\$160.00_
d. Other <u>cable and garbage</u>	\$125.00_
3. Home maintenance (repairs and upkeep)	\$250.00_
4. Food	\$1,200.00_
5. Clothing	\$300.00_
6. Laundry and dry cleaning	\$150.00_
7. Medical and dental expenses	\$300.00_
8. Transportation (not including car payments)	\$600.00_
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$200.00_
10.Charitable contributions	\$100.00_
11.Insurance (not deducted from wages or included in home mortgage payments)	Φ
a. Homeowner's or renter's	\$90.00_
b. Life	\$0.00_
c. Health	\$600.00_
d.Auto	\$200.00_
e. Other	\$0.00_
12.Taxes (not deducted from wages or included in home mortgage payments)	\$ 550.00
(Specify) <u>real estate</u> 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	\$550.00_
a. Auto	\$ 0.00
b. Other	\$
c. Other	\$0.00_
14. Alimony, maintenance, and support paid to others	\$0.00_
15. Payments for support of additional dependents not living at your home	\$0.00_
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$0.00_
17. Other child care	\$600.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,	\$
if applicable, on the Statistical Summary of Certain Liabilities and Related Data)	7,005.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this of	document:
None	
	_
20. STATEMENT OF MONTHLY NET INCOME	_
a. Average monthly income from Line 15 of Schedule (Includes spouse income of \$1,622.00. See Schedule I)	\$6,163.34
b. Average monthly expenses from Line 18 above	\$
c. Monthly net income (a. minus b.) (Net includes Debtor/Spouse combined Amounts)	\$

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Adam John Skerl	
In re	Case No
Debtor	(If known)

# **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

Date		
Date	Date March 17, 2010	Signature: /s/ Adam John Skerl
DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUTCY PETITION PREPARER (See II U.S.C. § 110)  I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § \$110(b), 110(b) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeably bankruptcy petition preparer. I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.  Printed or Typed Name and Title, if any,  Of Bankruptcy Petition Preparer  If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or parme who signs this document.  Address  X  Signature of Bankruptcy Petition Preparer  Date  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:  If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 116, 8 U.S.C. § 150.  DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership of the [the president or other officer or an authorized agent of the corporation or a member or t		Debtor:
[If joint case, both spouses must sign.]  DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER [See II U.S.C. § 110]  I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § § 110(b), 110(b) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeably bankruptcy petition preparer. I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.  Sectal Security No.  (Required by 11 U.S.C. § 110.)  If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.  Address  X  Signature of Bankruptcy Petition Preparer  Date  Sames and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:  If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both, 11 U.S.C. § 116 SU.S.C. § 156.  DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the	Date	Signature: Not Applicable
DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)  I declare under penalty of perjury that: (1) 1 am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) 1 prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § \$110(b); and (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a national preparer is prepared by bankruptcy petition preparers. I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.  Printed or Typed Name and Title, if any,  Of Bankruptcy Petition Preparer  Fined or Typed Name and Title, if any,  Of Bankruptcy Petition Preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or parme who signs this document.  Address  X  Signature of Bankruptcy Petition Preparer  Date  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:  If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.  Abankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 116 8 U.S.C. § 156.  DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership 1 of the [to president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership 1 of the [to president or other officer or an authorized agent of the corporation or		
DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)  I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § \$ 110, (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
compensation and have provided the debtor with a copy of this document and the notices and information required under It U.S.C. § 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers. I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.  Printed or Typed Name and Title, if any,  of Bankruptcy Petition Preparer  Printed or Typed Name and Title, if any,  of Bankruptcy Petition Preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or parme who signs this document.  Address  X  Signature of Bankruptcy Petition Preparer  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:  If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.  A hankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 116.  DECLARATION UNDER PENALTY OF PERIURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the  [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total thown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.  Signature:  [Print or type name of individual signing on behalf of debtor.]		
of Bankruptcy Petition Preparer  (Required by 11 U.S.C. § 110.)  If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.  Address  X	compensation and have provided the debtor with a copy of the 110(h) and 342(b); and, (3) if rules or guidelines have been by bankruptcy petition preparers, I have given the debtor no	this document and the notices and information required under 11 U.S.C. §§ 110(b), promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeably tice of the maximum amount before preparing any document for filing for a debtor or
Address  X	Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	·
Address  X		, title (if any), address, and social security number of the officer, principal, responsible person, or partne
Signature of Bankruptcy Petition Preparer  Sames and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:  If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 116.  DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the		
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Signature of Bankruptcy Petition Preparer  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:  If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 116.  DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total schown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.  Signature: [Print or type name of individual signing on behalf of debtor.]	Address	
Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:  If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 116  DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.  Signature: [Print or type name of individual signing on behalf of debtor.]		
If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 116 [8 U.S.C. § 156.]  DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.  Signature: [Print or type name of individual signing on behalf of debtor.]		
DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership ] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total schown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.    Print or type name of individual signing on behalf of debtor.]	Names and Social Security numbers of all other individuals who prepare	ed or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:
DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP  I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership ] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total schown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.  Signature: [Print or type name of individual signing on behalf of debtor.]	f more than one person prepared this document, attach additional signa	ed sheets conforming to the appropriate Official Form for each person.
I, the [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership ] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total schown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.    Signature: [Print or type name of individual signing on behalf of debtor.]		11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 11
n this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting ofsheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.    Signature:	DECLARATION UNDER PENALTY OF P	PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP
[Print or type name of individual signing on behalf of debtor.]	n this case, declare under penalty of perjury that I have read	d the foregoing summary and schedules, consisting ofsheets (total
	Date	Signature:
		Their control of the state of t

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# UNITED STATES BANKRUPTCY COURT

Northern District of California

In Re	Adam John Skerl	Case No.	
		(if known)	

# STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	
2010(db)	10604	earnings
2009(db)	75532	
2008(db)	75000	
2010(nfs)	10082	earnings
2009(nfs)	25311	
2008(nfs)	34000	

### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

None

### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF AMOUNT AMOUNT STILL PAYMENTS PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*)any payments that were made to a creditor on account of a domestic support obligation or as part of an alternativerepayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF AMOUNT AMOUNT STILL AND RELATIONSHIP TO DEBTOR PAYMENTS PAID OWING

None

 $\boxtimes$ 

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

### 6. Assignments and Receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS DATE OF PAYMENT, AMOUNT OF MONEY OR OF PAYEE NAME OF PAYOR IF DESCRIPTION AND OTHER THAN DEBTOR VALUE OF PROPERTY

Matthew M Spielberg 21855 Redwood Road Castro Valley, CA 94546 March 10, 2010 \$500

March 17, 2010 \$1800

### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

 $\square$ 

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY OR
DEBTOR'S INTEREST IN PROPERTY

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF AMOUNT OF SETOFF

### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

### 15. Prior address of debtor

None

 $\boxtimes$ 

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Lisa Skerl

### 17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

 $\bowtie$ 

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE ENVIRONMENTAL LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE ENVIRONMENTAL LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN **ADDRESS** 

NATURE OF BUSINESS BEGINNING AND

ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME

**ADDRESS** 

[Questions 19 - 25 are not applicable to this case]

\* \* \* \* \* \*

Date _	March 17, 2010	Signature	/s/ Adam John Skerl
		of Debtor	ADAM JOHN SKERL
	-	0 continuation sheets	attached
	Penalty for making a false statement: Fi	ine of up to \$500,000 or ii	nprisonment for up to 5 years, or both. 18 U.S.C. §152 and 357.
	DECLARATION AND SIGNATURE	E OF NON-ATTORNEY	BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 11
ompens des or ave giv	clare under penalty of perjury that: (1) I am a barsation and have provided the debtor with a copy of the guidelines have been promulgated pursuant to 11 U en the debtor notice of the maximum amount before	nkruptcy petition preparer is document and the notice S.C. § 110 setting a maximum.	as defined in 11 U.S.C. § 110; (2) I prepared this document for sand required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) mum fee for services chargeable by bankruptcy petition preparers,
ompens ales or ave give a that se	clare under penalty of perjury that: (1) I am a bar sation and have provided the debtor with a copy of the guidelines have been promulgated pursuant to 11 U en the debtor notice of the maximum amount before ection.	nkruptcy petition preparer is document and the notice .S.C. § 110 setting a maxi preparing any document for the setting and the setting any document for the setting and the setting a maximum and the setting and the setting a maximum and the setting and the set	as defined in 11 U.S.C. § 110; (2) I prepared this document for sand required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) mum fee for services chargeable by bankruptcy petition preparers, or filing for a debtor or accepting any fee from the debtor, as required Social Security No. (Required by 11 U.S.C. § 110(c).)
ompensules or ave given that se	clare under penalty of perjury that: (1) I am a bar sation and have provided the debtor with a copy of the guidelines have been promulgated pursuant to 11 U en the debtor notice of the maximum amount before ection.	nkruptcy petition preparer is document and the notice .S.C. § 110 setting a maxi preparing any document for the setting and the setting any document for the setting and the setting a maximum and the setting and the setting a maximum and the setting and the set	as defined in 11 U.S.C. § 110; (2) I prepared this document for sand required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) mum fee for services chargeable by bankruptcy petition preparers, or filing for a debtor or accepting any fee from the debtor, as require
ompensules or ave given that se	clare under penalty of perjury that: (1) I am a bat sation and have provided the debtor with a copy of the guidelines have been promulgated pursuant to 11 U en the debtor notice of the maximum amount before section.  Or Typed Name and Title, if any, of Bankruptcy Petitickruptcy petition preparer is not an individual, state the na.	nkruptcy petition preparer is document and the notice .S.C. § 110 setting a maxi preparing any document for the setting and the setting any document for the setting and the setting a maximum and the setting and the setting a maximum and the setting and the set	
ompensules or ave give that see that se	clare under penalty of perjury that: (1) I am a bat sation and have provided the debtor with a copy of the guidelines have been promulgated pursuant to 11 U en the debtor notice of the maximum amount before section.  Or Typed Name and Title, if any, of Bankruptcy Petitickruptcy petition preparer is not an individual, state the na.	nkruptcy petition preparer is document and the notice .S.C. § 110 setting a maxi preparing any document for the setting and the setting any document for the setting and the setting a maximum and the setting and the setting a maximum and the setting and the set	as defined in 11 U.S.C. § 110; (2) I prepared this document for sand required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) mum fee for services chargeable by bankruptcy petition preparers, or filing for a debtor or accepting any fee from the debtor, as require Social Security No. (Required by 11 U.S.C. § 110(c).)

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

# United States Bankruptcy Court Northern District of California

I	In re Adam John Skerl		Case 1	No	
			Chapt	ter 7	
I	Debtor(s)		1		
	DISCLOSURE	OF COMPENSATION OF	ATTORNEY FO	R DEBTOR	
а	Pursuant to 11 U .S.C. § 329(a) an and that compensation paid to me endered or to be rendered on beh	within one year before the filing of	the petition in bankru	iptcy, or agree	d to be paid to me, for services
F	or legal services, I have agreed to	accept	\$	2,300.00	
	Prior to the filing of this statement				
	Balance Due				
	The source of compensation paid				
	☑ Debtor	Other (specify)			
3.	The source of compensation to be	, , , , ,			
		Other (specify)			
т	I have not agreed to share th iates of my law firm.	e above-disclosed compensation	with any other person	unless they a	re members and
of my	I have agreed to share the ablaw firm. A copy of the agreemen	ove-disclosed compensation with t, together with a list of the names			
5.	In return for the above-disclosed	ee, I have agreed to render legal	service for all aspects	of the bankru	otcy case, including:
	<ul><li>a. Analysis of the debtor's financia</li><li>b. Preparation and filing of any pe</li><li>c. Representation of the debtor at</li></ul>	ition, schedules, statements of affa	irs and plan which ma	y be required;	
6. D		the above-disclosed fee does not in	clude the following ser	vices:	
Rep	resentation in Adversary and C	ontested Matters			
		CERT	IFICATION		
	I certify that the foregoing in debtor(s) in the bankruptcy pr	s a complete statement of any ago oceeding.	reement or arrangeme	ent for paymen	t to me for representation of the
	March 17, 2010		/s/ Matthew M S	pielberg	
	Date			Signature of A	ttorney
				Name of law f	irm

# UNITED STATES BANKRUPTCY COURT Northern District of California

	Adam John Skerl			
In re			Case No.	
111 10	Debtor	,	cuse 110.	Chapter 7

### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1 NO SECURED PROPERTY	
Creditor's Name:	Describe Property Securing Debt:
Property will be (check one):	
	etained
If retaining the property, I intend to (check at least one	e):
☐ Redeem the property	
☐ Reaffirm the debt	
Other. Explain	(for example, avoid lien
using 11 U.S.C. §522(f)).	
Property is (check one):	
☐ Claimed as exempt	☐ Not claimed as exempt
Property No. 2 (if necessary)	
Creditor's Name:	Describe Property Securing Debt:
Property will be (check one):	
	etained
If retaining the property, I intend to (check at least one	e):
Redeem the property	
☐ Reaffirm the debt	
Other. Explain	(for example, avoid lien
using 11 U.S.C. §522(f)).	
Property is (check one):	
Claimed as exempt	☐ Not claimed as exempt
_	-

B8 (Official Form 8) (12/08) Page 2

**PART B** - Personal property subject to unexpired leases. (All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)

Property No. 1 NO Leased Property		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
Property No. 3 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
continuation sheets attached (if an	an)	-
	-97	
declare under penalty of perjury that		
Estate securing debt and/or personal pr	roperty subject to an unexpired lease.	•
Date: March 17, 2010	/s/ Adam John Skerl	
	Signature of Debtor	
	Signature of Joint Debt	or

# UNITED STATES BANKRUPTCY COURT

Northern District of California

In re:

Adam John Skerl Case No.

Chapter 7

Debtor(s)

### **CREDITOR MATRIX COVER SHEET**

I declare that the attached Creditor Mailing Matrix, consisting of 2 sheets, contains the correct, complete and current names and addresses of all priority, secured and unsecured creditors listed in the Debtor's filing, and that this matrix conforms with the Clerk's promulgated requirements.

DATED March 23, 2010

/s/ Matthew M Spielberg

American Express PO Box 981537 El Paso TX 79998-1537

American Express
PO Box 981540
El Paso TX 79998-1540
Ft Lauderdale FL 33329-7863

Aurora Enterprises 2442 S Downing St Denver CO 80210

Cal Coast Credit Service 2906 McBride Lane Santa Rosa CA 95403

Chase Bank USA 800 Brooksedge Blvd Westerville OH 43081

Citi Cards PO Box 6241 Sioux Falls SD 57117

Dell ComputerWeb Bank 12234 N IH 35 SB Bldg B Austin TX 78753

Discover Financial Services PO Box 15316 Wilmington DE 19850

GMAC Mortgage PO Box 4622 Waterloo IA 50704-4622

Home DepotCitibank PO Box 6497 Sioux Falls SD 57117

Nationwide Credit Corporation PO Box 9156 Alexandria VA 22304

Rash Curtis Associates 190 S Orchard Ave Suite 250 Vacaville CA 95688

Sprint PO Box 660075 Dallas TX 75266-0075

	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
In re Adam John Skerl	☐ The presumption arises.
Debtor(s)	☐ The presumption does not arise.
Case Number:	☐ The presumption is temporarily inapplicable.
(If Impum)	

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY I NCOME AND MEANS-TEST CALCULATION

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUMER DEBTORS
1A	If you are a disabled veteran described in the Veteran's Declaration in this Part IA, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a.  I was called to active duty after September 11, 2001, for a period of at least 90 days and
	☐I was released from active duty on, which is less than 540 days before
	this bankruptcy case was filed; OR
	b. 🔲 I am performing homeland defense activity for a period of at least 90 days /or/
	I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

	Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION									
	Marita	Marital/filing status. Check the box that applies and complete the balance of this part of						nent as	direc	cted.
	a. 🔲 l	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.								
	b. Married, not filing jointly, with declaration of separate households. By checking this penalty of perjury: "My spouse and I are legally separated under applicable non-bankrupt living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of t Complete only Column A ("Debtor's Income") for Lines 3-11.							, spouse	e and	
2	c. 🗹 Colum	Married, not filing jointly, without the dec n A ("Debtor's Income") and Column	laration of se B ("Spouse	eparate l e's Inco	nouseholds set o me") for Lines	out in Line 3-11.	2.b abo	ove. Co	mple	ete both
	d.  for Lir	Married, filing jointly. Complete both Cones 3-11.	olumn A ("D	ebtor's	s Income") and	d Column	B ("Sp	ouse's	Inc	ome")
	All figures must reflect average monthly income received from all sources, derived during th six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.								Column B Spouse's Income	
3	Gross	wages, salary, tips, bonuses, overtim	ne, commiss	ions.			\$ 6,4	127.33	\$	3,875.66
4	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.									
	a.	Gross receipts		\$		0.00				
	b.	Ordinary and necessary business expe	enses	\$		0.00				
	C.	Business income		Subtra	ct Line b from L	ine a	\$	0.00	\$	0.00
5	differe	and other real property income. Subtraction of Line 5 clude any part of the operating expend.	5. Do not ent	ter a nui	mber less than a					
	a.	Gross receipts		\$		0.00				
	b.	Ordinary and necessary operating exp	enses	\$		0.00				
	C.	Rent and other real property income		Subtra	ct Line b from L	ine a	\$	0.00	\$	0.00
6	Intere	st, dividends and royalties.					\$	0.00	\$	0.00
7	Pension and retirement income.						\$	0.00	\$	0.00
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.					oaid for	\$	0.00	\$	0.00
9	Howeve was a k	ployment compensation. Enter the amo er, if you contend that unemployment con penefit under the Social Security Act, do n n A or B, but instead state the amount in t	npensation re ot list the am	eceived I nount of	by you or your s	spouse				
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00					\$	0.00	\$	0.00	

10	Income from all other sources. Specify source and amount. If necess sources on a separate page. Do not include alimony or separate main paid by your spouse if Column B is completed, but include all other alimony or separate maintenance. Do not include any benefits receiv Security Act or payments received as a victim of a war crime, crime again victim of international or domestic terrorism.	ce payments nents of ler the Social					
	a.	0.00					
	b.	\$	0.00				
	Total and enter on Line 10	•		\$	0.00	\$	0.00
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 th Column A, and, if Column B is completed, add Lines 3 through 10 in Columtotal(s).			\$ 6	5,427.33	\$	3,875.66
12	Total Current Monthly I ncome for § 707(b)(7). If Column B has bee Line 11, Column A to Line 11, Column B, and enter the total. If Column B completed, enter the amount from Line 11, Column A.			\$		1	0,302.99
	Part III. APPLICATION OF § 707(b)	(7) E	EXCLUSIO	N	_		
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the arnumber 12 and enter the result.	nount f	from Line 12 b	y the	e \$	12	23,635.88
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <a href="https://california">California</a> b. Enter debtor's household size: <a href="https://www.usdoj.gov/ust/">4</a>					7	79,194.00
	Application of Section 707(b)(7). Check the applicable box and proce	ed as o	directed				7,17 1.00
15	The amount on Line 13 is less than or equal to the amount on not arise" box at the top of page 1 of this statement, and complete F  The amount on Line 13 is more than the amount on Line 14.	n Line Part VII	14. Check the	olete	Parts IV,	V, V	I or VII.

Complete Parts IV, V, VI and VII of this statement only if required. (See Line 15).

	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)						
16	Enter the amount from Line 12.	\$	10,302.99				
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.    S						
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$	10,302.99				
	Part V. CALCULATION OF DEDUCTIONS FROM INCOME						
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)						
National Standards: food, clothing and items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)							

19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standard for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years or older. (The total number of household members must be the same as the number stated in Line 14b). Multiply line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household member 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount and enter the result in Line 19B.								
	Hou	f age or older							
	a1.	Allowance per member	60.00	a2.	Allowance p	er member	144.00		
	b1.	Number of members	4	b2.	Number of	members	0		
	c1.	Subtotal	240.00	c2.	Subtotal		0.00	\$	240.00
20A	IRS H	l Standards: housing ar ousing and Utilities Standard This information is available	ls; non-mortgage	e exper	nses for the ap	plicable county	and household	\$	692.00
20B	the an housel court) as sta	Standards: housing armount of the IRS Housing and hold size (this information is genter on Line by the total of ted in Line 42; subtract Line nt less than zero.  AURS Housing and Utilities St.  Average Monthly Payment your home, if any, as state	d Utilities Standa available at www the Average Mo b from Line a ar LAMEDA COUN andards; mortga for any debts se	w.usdoj nthly Pand ente NTY ge/ren	ortgage/rent e i.gov/ust/ or fi ayments for a r the result in tal expense	expense for you rom the clerk of ny debts secure	r county and f the bankruptcy d by your home,		
	c. Net mortgage/rental expense Subtract Line b from Line a					\$	0.00		
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:								0.00
22A	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.  AN FRANCISCO - total includes extra \$400 for 2 old vehicles  If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)							\$	1,012.00
22B	Local Standards: transportation; additional public transportation expense.  If you pay the operating expenses for a vehicle and also use public transportation, and you contend							\$	0.00

Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you daim an ownership/lease expense for more than two vehicles.)    Time a below, the "Ownership Costs" for "One Car" from the IRS Transportation Standards: Transportation (available at <a href="https://www.usdi.gov/ust/">www.usdi.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the lot in a and enter the result in Line 2.3. Do not enter an amount less than zero.   A line in the deverage Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42 subtract Line b from Line a and enter the result in Line 2.3. Do not enter an amount less than zero.								
Enter. in Line a below, the "Ownership Costs" for "One Car" from the IRS Transportation Standards: Transportation (available at yew. usdo) gov/sst/ or from the clerk of the bankruptry count): enter in Line 1 to the total of the Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42: subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.    Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42:		number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)						
a. IRS Transportation Standards, Ownership Costs \$ 496.00 b. Average Monthly Payment for any debts secured by Vehicle 1. \$ 0.00 c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a. \$ 0.00 conly if you checked the "2 or more" Box in Line 23.	23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Transportation Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42;						
Local Standards: transportation ownership/lease expense for Vehicle 1  Local Standards: transportation ownership/lease expenses: Vehicle 2. Complete this Line only if you checked the *2 or more* Box in Line 23.  Enter. in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/lus/Lor from the Clerk of the bankrupte; ourt): enter in Line b the lotal of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42: subtract Line b from Line a and enter the result in line 24. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 496.00  b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42: subtract Line b from Line a and enter the result in line 24. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 9,000  Cher Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: Involuntary deductions for employment. Enter the total average monthly payorol deductions that are required for your employment, such as voluntary 401(k) Contributions.  Other Necessary Expenses: life insurance. Enter total average monthly preniums that you actually pay for term life insurance for yourself. Do not include permitums on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you actually expend to child carter. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: chealth care. Enter the total average monthly amount that you actua								
Local Standards: transportation ownership/lease expense: Vehicle 2. Complete this Line only if you checked the '2 or more' Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at yown-usdoi, Joavust or from the IcRs to the bankruptey court): enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 496,00 as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.  b. Average Monthly Payment for any debts secured by Vehicle 2; \$ 0,00 as stated in Line 42; subtract Line b from Line a. Other Necessary Expenses: taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Such as a stated in Line 42; subtract Line b from Line a. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance on past due obligations included in Line 44.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend for mentally challenged chi		b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 0.00						
24 24 25 26 27 28 28 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20		c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.		0.00				
(available at www.usdoi.gov/isst/ or from the clerk of the bankrupty court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42, subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$ 496.00  b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42.  c. Net ownership/lease expense for Vehicle 2 \$ 50.00  25 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for playment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  26 Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll eductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  27 Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.  28 Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  29 Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  30 Other Necessary Expenses: childcare. Enter the total average mon								
a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.  Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payment laves, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payment laves, social security taxes, and Medicare taxes. Do not include premiums on your dependents, for whole life or for any other form of insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is nexcess of the amount entered in Lin 98. Do not include paym	24	(available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b						
Doctor   Decessor   Expenses: the province   Decessor   Expenses: the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.    Other   Necessary Expenses: the province   Expenses: the province   Supplementation	24	a. IRS Transportation Standards, Ownership Costs \$ 496.00						
Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 198. Do not include payments for health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health s								
for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401 (k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services there the total average monthly amount that you actually pay for telecommunication services other		c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.	\$	0.00				
average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401 (k) contributions.  Other Necessary Expenses: life Insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously de	25	for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self em-	\$	2,140.00				
actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 198. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  * 80.00	26	average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as						
you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  **South Table Expenses Allowed we developed to Expendents to the table of the payments and the payments are table to the payments and the payments and the payments are table to the payments and the payments are table to the payments and the payments are table to the payments and the payments are payments and payments.  **South Table Expenses Allowed we developed to the payments and the payments are payments and the payments and paymen	27	actually pay for term life insurance for yourself. Do not include premiums on your dependents, for	\$	0.00				
mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  Texts   Expenses Allowed winder   DC Standards   Extra the total of the payers   20   20   20   20   20   20   20   2	28	you are required to pay pursuant to court order or administrative agency, such as spousal or child						
Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  **80.00**	29	mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or						
Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  **80.00**	30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other						
Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  **80.00**	31	actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings						
Total Expanses Allowed under IDC Ctandends - Extends the total of the control 22	32	amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any						
	33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32	\$	6,595.00				

	Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 19-32.								
	Health Insurance, Disability Insurance and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for your spouse, or your dependents.								
	a. Health Insurance \$ 161.00								
	b.	Disability Insurance	\$ 0.00						
34	C.	Health Savings Account	\$ 0.00		161.00				
	Tot	al and enter on Line 34.		\$	161.00				
		you do not actually expend this total amount, state your actual ce below:  0.00	average expenditures in the						
35	averag suppor	nued contributions to the care of household or family re actual monthly expenses that you will continue to pay for the reast of an elderly, chronically ill, or disabled member of your household who is unable to pay for such expenses.	onable and necessary care and	\$	0.00				
36	expens Preven	ction against family violence. Enter the total average reasonates that you actually incurred to maintain the safety of your family untion and Services Act or other applicable federal law. The nature of the tonfidential by the court.	nder the Family Violence	\$	0.00				
37	IRS Lo	e energy costs Enter the total average monthly amount, in excess cal Standards for Housing and Utilities that you actually expend for he le your case trustee with documentation of your actual expensions that the additional amount claimed is reasonable and	nome energy costs. You must ses, and you must	\$	0.00				
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.								
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.								
40	Continued charitable contributions. Enter the amount that you will continue to contribute in								
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40.								

		Suk	ppart C: Deductions for De	ebt P	ayment		
	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total Average Monthly payments on Line 42.						
42		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance?	
	a.	GMAC	residence	\$	3,128.00	☐ yes ☑no	
	b.	GMAC	residence	\$	608.00	☐ yes ☑no	
	C.	Alameda County	residence	\$ Tota	581.00 al: Add Line	□ yes ☑no	
					and c		\$ 4,317.00
	Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.						
43		Name of Creditor	Property Securing the Deb		1/60th of th	ne Cure Amount	
	a.	GMAC	residence		\$	140.00	
	b.	Alameda County	residence		\$	0.00	
	C.				\$	0.00	
							\$ 323.33
44	clair	ns, such as priority tax, child s	ority claims. Enter the total amoupport and alimony claims, for which lide current obligations, such a	h you	were liable a	t the time of	\$ 0.00
	Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.						
	a. Projected average monthly Chapter 13 plan payment.				\$	0.00	
45	b.	schedules issued by the I	ur district as determined under Executive Office for United States on is available at <a href="www.usdoj.gov/ubankruptcy">www.usdoj.gov/ubankruptcy</a> court.)	st/	x	9.5 %	
	C. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b						\$ 0.00
46	Tot	al Deductions for Debt Pa	ayment. Enter the total of Lines	42 thro	ough 45.		\$ 4,457.00
	Subpart D: Total Deductions from Income						
47	Tot	al of all deductions allow	red under § 707(b)(2). Enter	the to	tal of Lines 33	3, 41, and 46.	\$ 11,363.00

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Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION								
48								
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707	(b)(2))	\$	11,363.00				
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and 6 result.	nter the	\$	-1,060.01				
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.							
	Initial presumption determination. Check the applicable box and proceed as directed.							
	The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.							
52	The amount set forth on Line 51 is more than \$10,950. Check the "Presumption arises" boy page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do the remainder of Part VI.							
	The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the VI (Lines 53 through 55).							
53	Enter the amount of your total non-priority unsecured debt		\$	N.A.				
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 a enter	nd	\$	N.A.				
	Secondary presumption determination. Check the applicable box and proceed as directed.							
55	<ul> <li>☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.</li> <li>☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.</li> </ul>							
Part VII: ADDITIONAL EXPENSE CLAIMS								
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current montincome under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect you average monthly expense for each item. Total the expenses.							
56	Expense Description	Monthly A	mount					
30	a. \$		0.00					
	b. \$		0.00					
	\$ \$		0.0	00				
	Total: Add Lines a, b and c							
Part VIII: VERIFICATION								
I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a joint case, both debtors must sign.)								
	Date: March 17, 2010 Signature: /s/ Adam John Skerl							
57	(Oction)							
	Date: Signature:(Joint Debtor, if any)							
	(35 252.6. <sub>7</sub> 4.1 <b>y</b> )							

Income Month 1			Income Month 2		
Gross wages, salary, tips	5,302.00	5,041.00	Gross wages, salary, tips	5,302.00	5,041.0
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.0
Other Income	0.00	0.00	Other Income	0.00	0.0
Income Month 3			Income Month 4		
Gross wages, salary, tips	6,990.00	3,293.00	Gross wages, salary, tips	6,990.00	3,293.0
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.0
Other Income	0.00	0.00	Other Income	0.00	0.0
Income Month 5			Income Month 6		
Gross wages, salary, tips	6,990.00	3,293.00	Gross wages, salary, tips	6,990.00	3,293.0
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.0
Other Income	0.00	0.00	Other Income	0.00	0.0

# Additional I tems as Designated, if any

# Remarks